PTO/SB/06 (12-04)

Approved for use through 7/31/7006 OMB 0551-0032 U.S. Patert and Trademan Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number PATENT APPLICATION FEE DETERMINATION RECORD Application of Operal Number 1015/8840 Substitute for Form PTO-875 APPLICATION AS FILED - PART I OTHER THAN OR (Cotumn 1) SMALL ENTITY (Column 2) SMALL ENTITY FOR NUMBER FILEO NUMBER EXTRA RATE (\$) FEE (S) RATE (\$) BASIC FEE (37 CFR 1 (6(a), (b), or (c)) SEARCH FEE (37 CFR 1.16(N), (I), or (m)) EXAMINATION FEE (3) CFR 1 16(a), (p), or (q)) TOTAL CLAIMS (37 CFR 1 16(in) menus 20 s OR INDEPENDENT CLAIMS (37 CFR 1 16(N) If the specification and drawings exceed 100 sheets of paper, the application size fee due APPLICATION SIZE FEE (37 CFR + 16(4)) is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1 16(3) If the difference in column 1 is less than zero, enter "O" in column ? TOTAL IOTAL APPLICATION AS AMENDED - PART II OTHER THAN OR ((Cotumn 1) (Cotumn 2) (Column 3) SMALL ENTITY SMALL ENTITY HIGHEST PRESENT RATE (\$) REMAINING NUMBER RATE (\$) ADDI-TIONAL PREVIOUSLY FIONAL AMENDMENT ENDMENT PAID FOR FEE (S) FEE (S) Total or cen i.isin 90 C/R Independent Of CFR 1 180-8 Mittus OR Application Size Fee (37 CFR 1 15(s)) FIRST PRESENTATION OF MURTIPLE DEPENDENT CLAIM (37 CFR 1 16(1) OR TOTAL TOTAL ADD'L FEE OR ADD'L FEE (Column 2) (Cotumn 3) CLAIMS HIGHEST REMAINING NUMBER PRESENT RATE (S) ADDI ADDI-RATE (\$) AFTER AMENDMENT PREVIOUSLY **EXTRA** FEE (S) PAID FOR FEE (\$) Total prom titign OR Independent (37 CFR 1,190.8 OR Application Size Fee (37 CFR 1.16(s)) FIRST PRESENTATION OF MILITIPLE DEPENDENT CLAIM (37 OFR 1.15(1)) ΩR TOTAL TOTAL OR ADD'L FEE ADD'L FEE * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "7".

The "Highest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1.

The Trighest Number Previously Paid For (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to fite (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the smound of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patient and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450.

DONOT SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.